# IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:

Miyuki FUKASAWA et al.

Title:

MICROCAPSULE AND PRODUCTION METHOD THEREOF

Appl. No.:

Unknown

Filing Date:

11/18/2003

Examiner:

Unknown

Art Unit:

Unknown

# **UTILITY PATENT APPLICATION** TRANSMITTAL

Mail Stop PATENT APPLICATION Commissioner for Patents PO Box 1450 Alexandria, Virginia 22313-1450

Sir:

Transmitted herewith for filing under 37 C.F.R. § 1.53(b) is the nonprovisional utility patent application of:

> Miyuki Fukasawa c/o Specialty Chemicals Research Center, Shin-Etsu Chemical Co., Ltd. 28-1, Nishi-Fukushima, Kubiki-mura Naka Kubiki-gun, Niigata-ken Japan

Kazuhisa Hayakawa c/o Specialty Chemicals Research Center Shin-Etsu Chemical Co., Ltd. 28-1, Nishi-Fukushima, Kubiki-mura Naka Kubiki-gun, Niigata-ken Japan



### Enclosed are:

- [X] Specification, Claim(s), and Abstract (19 pages).
- [X] Declaration and Power of Attorney (2 pages).
- [X] Assignment of the invention to Shin-Etsu Chemical Co., Ltd..
- [X] Assignment Recordation Cover Sheet.
- [X] Check in the amount of \$40.00 for Assignment recordation.
- [X] Information Disclosure Statement.
- [X] Form PTO/SB/08 with copies of 2 listed reference(s).
- [X] Application Data Sheet (37 CFR 1.76).
- [X] Claim for Convention Priority.

# The filing fee is calculated below:

	Claims as Filed		Included in Basic Fee		Extra Claim	ıs	Rate		Fee Totals
Basic Fee							\$770.00	=	\$770.00
Total	9	-	20	=	0	x	\$18.00	=	\$0.00
Claims:									
Independents	2	-	3	=	0	x	\$86.00	=	\$0.00
:									
If any Multiple	e Dependen	t C	laim(s) pres	ent:		+	\$290.00	=	\$0.00
•,							SUBTOTAL:	=	\$770.00
[ ]		S	mall Entity I	Fees	Apply	(subtr	act ½ of above):	=	\$0.00
						TOTA	L FILING FEE:	=	\$770.00

- [X] A check in the amount of \$770.00 to cover the filing fee is enclosed.
- [ ] The required filing fees are not enclosed but will be submitted in response to the Notice to File Missing Parts of Application.

[X] The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 19-0741. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 19-0741.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date Nov. 18, 2003

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